## SCHEDULE B (FEC Form 3X)

SCILDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)		OR LIN	E NUMB		AGE	3//4	1	_		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 28a	Х	23 28b	24 28c		25 29	26	
Any Information copied from such Reports and Stateme or for commercial purposes, other than using the name											
NAME OF COMMITTEE (In Full)	and address of any pointed co	OHIIII		SOIIGIT GOI	itiiDUl		JIII SUUII	COITIII	IIIICC		_
AGA TRADE ASSOCIATION INC PAC											_
Full Name (Last, First, Middle Initial)							D4767	7			
A. MICHAEL BURGESS FOR CONGRESS					isburse		Y Y	Y	Υ		
Mailing Address PO Box 2334				O 6	8 <sup>M</sup>	2	6 /	2	0 ŏ 7		
	itate Zip Code FX 76202			Amo	ount c	f Each	Disburs	emen	t this P	eriod	_
Purpose of Disbursement		U	-	1 L				2	0.000	0	
Campaign Contribution  Candidate Name  Category/											
Rep. Michael C. Burgess			gory/ pe								
Office Sought: X House Disburser											
	Primary General Other (specify) ▼										
State: TX District: 26	· · · · · · · · · · · · · · · · · · ·										
Full Name (Last, First, Middle Initial)   NIKE THOMPSON FOR CONGRESS							D4082	6			
				M	М	isburse		ΥΫ́	, Y =	Υ	
Mailing Address 5429 Madison Avenue				0.5			5 /	2	0 Ď 7		
,	state Zip Code CA 95841			Amo	ount c	f Each	Disburse	emen	t this P	eriod	
Purpose of Disbursement				1 L				1	000.0	0	
Campaign Contribution Candidate Name		Cata	aon/								
Rep. Mike Thompson			gory/ pe								
Office Sought: X House Disburser											
	Primary General Other (specify) ▼										
State: CA District: 1											_
Full Name (Last, First, Middle Initial)  KIND FOR CONGRESS COMMITTEE				_		ion ID:	D4082	5			
				М		5 /	Y Y	0 ŏ 7	Υ		
Mailing Address 205 South 5th Ave											
,	itate Zip Code VI 54601			Amo	ount c	f Each	Disburse	emen	t this P	eriod	
Purpose of Disbursement Campaign Contribution				7 L				. 1	0.000	0	
Candidate Name Category/			gory/								
Rep. Ron J. Kind			pe ,								
Office Sought: X House Disburser Senate X	nent For: 2008 Primary General										
President	Other (specify)										
State: WI District: 3											_
SUBTOTAL of Disbursements This Page (optional)			<u> </u>					4	0.000	0	
TOTAL This Period (last page this line number only) .			•								